

The Key to Affordable Health Care Reform:

Better Health through Prevention

That nearly 50 million Americans lack health insurance while the nation spends more than any country on earth for health care is tragic. That insured Americans must pay ever-higher deductibles and co-pays that discourage them from using preventive care services, and pay higher insurance premiums and taxes to cover costs of people who develop preventable diseases, is inexcusable. The high cost of health care is hurting everyone.

Healthcare reform advocates offer an array of mandates and cost-cutting measures for achieving near-universal or universal coverage. In the short run, such strategies—portability of insurance, automatic eligibility, more generic drugs, mandates, etc.—might get everyone in the system. But with the population aging, Medicare and Medicaid facing a financial crunch, new technology getting more expensive, and prevention undermined, they do provide for long-term sustainability.

To make high-quality, universal health-care affordable over the long haul, health-care policies must include serious strategies for improving the *health* of the American people. Insurance should be seen as a service not just for sick people—but an important tool to keep people well. *Comprehensive prevention programs are the most economical way to maximize health and minimize costs.*

Alas, our health care system, our regulatory system, and our social environment actively discourage this common sense approach to better health and lower costs. On the campaign trail, the presidential candidates have said little about prevention. Meanwhile, insurance companies have shown little interest in prevention in terms of their own policies – let alone governmental initiatives—partly because the benefits of prevention may accrue only after a policyholder switches to a different company. But here are some facts to keep in mind:

- We spend over \$100 billion a year treating heart disease, but a pittance to prevent its major causes—obesity, diabetes, and hypertension.
- Smoking remains the single leading cause of cancer, yet investment in proven prevention and cessation programs is minuscule.
- Each year alcohol abuse kills almost 85,000 people and ruins countless lives, yet the government largely ignores the nation's number-one drug abuse problem.

Indeed, just four behaviors – poor diet, physical inactivity, smoking, and alcohol abuse –cause a high percentage of chronic disease and account for 38 percent of deaths. Addressing those problems through prevention will save lives, reduce health care costs, and help Americans lead longer, healthier, and happier lives.

Any health-care legislation should have a strong *prevention* section that includes what government must do and what the health insurance system must cover. And it should contain powerful incentives to help individuals adopt healthier lifestyles!

Did you know that...

- More than 90 million Americans live with chronic illnesses such as diabetes, cancer, and heart disease; that those diseases account for 70 percent of all deaths and 75 percent of all health care expenditures.
- Tobacco use alone accounts for 430,000 deaths each year.
- Only 2 to 3 percent of health care spending goes for preventing illnesses.
- About 60 million Americans are obese and another 48 million are overweight; obesity costs families, businesses, and government about \$117 billion a year in health care and related costs.
- People who are obese or overweight are at increased risk of high blood pressure, type 2 diabetes, coronary heart disease, stroke, and some cancers.
- Weight loss and exercise can curb the progress of diabetes by 50 percent.
- Deploying proven programs for reducing tobacco use and obesity would save nearly \$500 billion in health care expenses over the next ten years.
- Only 49 percent of U.S. adults get counseling or advice from physicians on weight, nutrition, or exercise, compared to 72 percent in the United Kingdom.
- Between 1987 and 2002, the number of obese Medicare beneficiaries doubled, while the share of Medicare spending on the obese tripled.
- The nation spent \$132 billion on people with diabetes in 2002 and that health-care spending for a diabetic is five times higher than for a person without it.
- Greater consumption of fruits and vegetables helps protect against obesity, heart disease, and cancer.
- Students given free fruit and vegetable snacks at school eat fewer high-calorie, high-fat vended snacks, have better attention spans, are less hungry throughout the day, visit the nurse less often, and have fewer discipline problems.
- Government's annual budget to promote fruit and vegetable consumption is less than what McDonald's spends on ads in a day.
- 65 million American adults have high blood pressure, another 45 million have "prehypertension," and about 90 percent of Americans will eventually develop hypertension—and much of that is preventable.
- Salt in packaged and restaurant foods is a major cause of high blood pressure. Americans get three-quarters of their sodium from such foods; cutting that sodium in half would prevent 150,000 deaths a year.
- Consumption of trans fats, from partially hydrogenated oils, is causing about 25,000 fatal heart attacks each year.
- The government spends \$1.8 billion annually to combat youth drug use, but only \$71 million to prevent underage alcohol use. Yet, alcohol kills six times more youths than all other drugs combined.
- Alcohol tax rates have fallen far behind inflation. Higher alcohol taxes would help reduce the toll of alcohol-related problems, particularly among young people. Polls show broad public support for higher alcohol taxes, especially when the revenues would fund alcohol-related prevention and treatment programs.

The Prevention Program:

Rebalancing America's Diet and Lifestyle

- **Government Action:**
 - **Increase Fruit and Vegetable Consumption** to protect against obesity, early-onset diabetes, heart disease, and cancer. The government should provide free fruit and vegetable snacks at schools, provide bonus food stamps for fruits and vegetables, and mount major media campaigns to promote greater consumption.
 - **Reduce Sodium Consumption** by having the FDA limit the sodium levels considered “safe” in processed and restaurant foods or require warning notices on high-sodium products (high sodium levels are a major cause of the high blood pressure plaguing 65 million Americans)..
 - **Reduce Childhood Soda Consumption** by removing this sugar-laden choice from all school vending machines. A one-cent per can federal tax on soda pop could provide \$1.5 billion per year funding for major health and nutrition campaigns, including television ads, building of bike paths, paying for school programs, and the like.
 - **Eliminate Trans Fat from Processed and Restaurant Foods** to remove a major cause of heart disease. With alternative, healthier oils increasingly available, the FDA should ban partially hydrogenated oil, the source of artificial trans fat.
 - **Help Consumers Reduce Caloric Intake.** Congress should require chain restaurants, where Americans spend a good portion of their food dollar, to post calories and other nutrition information on menus and menu boards.
 - **Encourage Physical Activity** through media campaigns; grants to school districts that offer daily gym classes; subsidies for the construction of mass transit, bike paths, hiking trails, basketball courts, and other means of facilitating activity; tax credits for employers that offer time and facilities for regular exercise; subsidies to individuals who use mass transit, walk, or bike to work; and tax breaks to builders who create walkable environments. Appoint a fitness czar!
 - **Discourage Tobacco and Alcohol Abuse** through higher taxes (indexed for inflation), with the revenues earmarked for defraying health care costs and running national media campaigns that encourage smoking abstinence and cessation and discourage underage and binge drinking.
 - **Have Para-professionals** work in underserved communities to promote healthier lifestyles, screening of individuals for risk factors for chronic diseases, and adherence to medications.

- **Health Care Reform:**

- **All Insurance Plans Must Reimburse Obesity Treatment** in clinical settings, and must include dietary counseling and follow-up.
- **All Insurance Plans Must Cover Proven Smoking Cessation and Alcohol Counseling Programs** whose design encourages compliance.
- **Insurance Plans Must Cover Clinical Prevention Services** that the U.S. Preventive Services Task Force has determined are clinically-effective and cost-effective.
- **Create a Comparative Effectiveness Research Institute** free from industry influence to determine and constantly update what are the most clinically-effective and cost-effective prevention strategies.
- **Continuing Medical Education Must Include Obesity Prevention and Treatment Training** for primary-care physicians, nurses, and other health professionals.
- **Revitalize State and Local Public Health Departments** with grants from public and private insurers to provide community-based group and school diet, exercise, smoking cessation and alcohol counseling; plus, targeted diabetes and hypertension screening aimed at underserved and at-risk populations.
- **Promote Public Service by Physicians** by offering free medical school tuition to young physicians willing to spend five years in at-risk communities delivering the full range of primary prevention screening, clinical services, and counseling programs. Side benefit: Training the next generation of primary-care physicians in proper prevention techniques.

- **Incentives for Personal Responsibility:**

- **Eliminate Co-pays and Deductibles for Enrolling in Primary Prevention Programs** like smoking cessation and dietary counseling.
- **Offer Discounted Premiums** to employers or individuals for staying enrolled and achieving the goals of primary prevention programs.
- **Offer Tax Breaks to Food Companies and Restaurants** that make the healthy choices the least expensive items on shelves or menus.